



# ADAPTING EMERGENCY SERVICES TO COVID-19

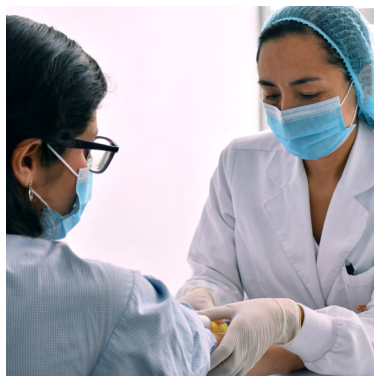
Colombian Red Cross

Investing in disaster preparedness is valuable - both in terms of lives saved and economic returns. In this story, we learn how the Colombian Red Cross' Cundinamarca and Bogotá Sectional set for itself the challenge of quickly adapting to changes and formulating strategies to ensure care for patients diagnosed with COVID-19 and contribute to solving the crisis.

## Preparing and getting ready for epidemics and pandemics

The Colombian Red Cross' Cundinamarca and Bogotá Sectional Emergency Medical Services (EMS) serve as a model for low-complexity outpatient emergency care. EMSs are made up of three care facilities in the city of Bogotá, strategically located in the northern, central and southern parts of the city to provide network coverage. As part of the city's care service network, EMSs have carried out preparedness activities for public health events in recent years, including epidemic peaks of endemic diseases such as seasonal influenza, or preparations for events of international significance such as Ebola during the epidemic in West Africa. These actions included preparedness exercises, increased human resource and supply capacities, training of human resources, simulations, and the adaptation of in-hospital and home services, among others.

As a result of the different alerts issued by organizations and governments at the beginning of the COVID-19 pandemic, prior to the arrival of the virus in the country, the EMSs began a process of evaluating response capacities for the care of COVID-19 patients. This preparedness process managed to identify the need to implement expansion plans for emergency services, including health personnel to avoid exhaustion, to acquire additional medical supplies and personal protective equipment (PPE), and to further train health personnel. The Sectional's experience in providing emergency care and responding to contingencies caused by high service demand was key to address the future emergency caused by the COVID-19 pandemic.



## Strategies to ensure access to medical services

Following the Ministry of Health's guidelines, the Sectional created differentiated care routes for patients with respiratory and non-respiratory illness, converting outpatient care areas into consultation, observation, and resuscitation areas for COVID-19 patients. The complexity of the cases and the collapse of the city's hospital network imposed the challenge of optimizing the space, transforming non-specialized medical care areas into resuscitation and care units for critical patients with prolonged stays. Additionally, the Sectional opened a low-complexity hospitalization service for COVID-19.

In line with the need for health care adapted to the characteristics of COVID-19, and thanks to coordination with the local health secretary and other insurance companies, the Section quickly implemented a home care service linked to a telemedicine/teleorientation service for patients with high and low risk levels. The Sectional also established an internal medicine assessment strategy through telemedicine in hospitalized patients, in order to address the inherent risk in the crisis caused by the pandemic. Although currently inactive, the telemedicine service is envisioned as a programme to be implemented in the future by the Sectional.



### PREPAREDNESS AREA & COMPONENT RELATED

#### OPERATIONAL CAPACITY



Health in Emergencies

#### KEY STATS



Pre-pandemic: 0 hospital beds and 33 observation beds.  
Post-pandemic: 45 hospital beds and 56 observation beds.



By July 2021, 627 hospitalized COVID-19 patients and 55,070 home consultations conducted for COVID-19.



Teleorientation service for 168,947 low-risk COVID-19 patients, and telemonitoring for 25,095 high-risk COVID-19 patients.

## Lessons learned



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- Value of response planning for health emergencies to generate immediate actions, and of preparing for events that exceed the capacities of emergency facilities.
- Importance of human talent with continuous training, and of providing emotional support and mental health programmes.
- Scale-up and adaptation of health services to generate expansion and circulation plans that can be adapted to future epidemic peaks or pandemic situations.
- Value of intra- and inter-institutional cooperation at facilitating the availability of resources to ensure care, including lessons to apply at other health services in the country.



*"The COVID-19 pandemic expanded the field of care of our emergency services, leading us to the implementation of more complex services for critical and hospitalized patients, to the acquisition of more complex biomedical equipment, medical furniture, drugs and medical devices, and to strengthening the training capacities of human talent."*

*Dra. Lila Ramírez, MD, Director of Health, Colombian Red Cross' Cundinamarca and Bogotá Sectional*

### Additional Resources:

- EMS Service of the Colombian Red Cross' Cundinamarca and Bogotá Sectional: [Link](#)



### For more information:

- Colombian Red Cross: [www.cruzrojacolombiana.org](http://www.cruzrojacolombiana.org)
- Colombian Red Cross' Cundinamarca and Bogotá Sectional: [www.cruzrojabogota.org.co](http://www.cruzrojabogota.org.co)
- National Society Preparedness: [www.ifrc.org/disaster-preparedness](http://www.ifrc.org/disaster-preparedness)
- Epidemic and Pandemic Preparedness: [www.ifrc.org/epidemic-and-pandemic-preparedness](http://www.ifrc.org/epidemic-and-pandemic-preparedness)

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